

July 2011

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Public Four-Year Universities

Name: Dr. Charles Ambrose
Institution: University of Central Missouri
Phone: 660-543-4883
Contact Person: Dorothy Salsman

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 201	.1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$224,091			\$250,000		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation	\$5,000			\$25,000		
Retirement benefit						
Other (please specify)						
Relocation and Business related Expenses				\$20,000		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$229,091	\$0	\$0	\$295,000	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendit	tures		FY 2011 Estimated	
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing			\$12,000			\$12,000
Utilities	\$13,171			\$11,058		
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper	\$18,000			\$20,448		
Custodian, groundskeeper	\$41,696			\$37,130		
Insurance for personal property	\$0			\$0		
Entertainment						
Automobile	\$740			\$1,282		
Automobile allowance (provided for private lease/purchase)				\$14,033		
Automobile repair/maintenance/mileage						
Professional development	\$4,222			\$5,834		
Expense for spouse/family to attend meetings		\$517			\$50	
Club/other memberships	\$402			\$110		
Other (please specify) (on-star subscription)	\$406					
TOTAL	\$78,637	\$517	\$12,000	\$89,895	\$50	\$12,000

Name: Dr. Henry Givens, Jr.

Institution: Harris-Stowe State University

Phone: (314)340-3321

Contact Person: Constance Gully

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures		
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$209,634			\$209,634		
Medical/dental/vision insurance for self	\$5,090		\$419	\$5,241		\$419
Medical/dental/vision insurance for spouse/family	\$7,041		\$7,041	\$7,022		\$7,022
Long-term disability for self	\$5,511		\$5,135	\$5,747		\$5,351
Deferred compensation						
Retirement benefit	\$25,098		\$0	\$25,114		\$0
Other (please specify)						
Additional life insurance	Value					
(payments)	\$9,286					
Annuity	Value					
(payments)	\$45,000					
TOTAL	\$252,374	\$0	\$12,595	\$252,758	\$0	\$12,792

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing	\$55,000			\$55,000		
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$9,846			\$9,906		
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$8,736			\$8,702		
Other (please specify)						
TOTAL	\$73,582	\$0	\$0	\$73,608	\$0	\$0

Name: Dr. Carolyn Mahoney
Institution: Lincoln University
Phone: 573 681-5042
Contact Person: Jim Marcantonio-Human Resource Director

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$179,025			\$179,025		
Medical/dental/vision insurance for self	\$4,590			\$4,819		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$985			\$985		
Deferred compensation						
Retirement benefit	\$22,431			\$24,723		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
	\$17,000					
TOTAL	\$207,031	\$0	\$0	\$209,552	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	112	220 / ICLUUT EXPERIUT			Lorr Estimated	
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)	\$18,000			\$18,600		
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,500		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$25,200	\$0	\$0	\$26,100	\$0	\$0

Name: Dr. Bruce Speck

Institution: Missouri Southern State University

Phone: 417-625-9805

Contact Person: Debbie Dutch Kelley, Director Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures		
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$180,000			\$180,000		
Medical/dental/vision insurance for self	\$4,793			\$5,108		
Medical/dental/vision insurance for spouse/family	\$0			\$0		
Long-term disability for self	\$237			\$237		
Deferred compensation	\$16,000		\$16,000	\$16,000		\$16,000
Retirement benefit	\$18,196			\$18,337		
Other (please specify)						
Additional life insurance	Value					
	\$180,000					
Annuity	Value					
	\$0					
TOTAL	\$219,226	\$0	\$16,000	\$219,682	\$0	\$16,000

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	112	220 / ICCOUNT EXPENSION			Lori Estimated	
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing	\$40,000			\$40,000		
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$1,782			\$1,782		
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings	\$0			\$0		
Club/other memberships	\$0			\$0		
Other (please specify)						
TOTAL	\$41,782	\$0	\$0	\$41,782	\$0	\$0

Name: Dr. Michael Nietzel - resignation date - 7/31/10

Institution: Missouri State University

Phone: (417) 836-4232

Contact Person: Tina McManus-Director of Accounting and Budgeting

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$267,372			\$22,281		
Medical/dental/vision insurance for self	\$5,094			\$425		
Medical/dental/vision insurance for spouse/family	\$3,491			\$291		
Long-term disability for self	\$336			\$28		
Deferred compensation	\$200,000			\$0		
Retirement benefit	\$18,899		\$21,217	\$1,575		\$1,768
Other (please specify)						
Basic Life	\$496			\$41		
Additional life insurance	Value					
	\$300,000					
Annuity	Value					
TOTAL	\$495,688	\$0	\$21,217	\$24,641	\$0	\$1,768

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$45,000			\$3,750		
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage	\$2,868			\$2,357		
Professional development						
Expense for spouse/family to attend meetings		\$39		\$1,229		
Club/other memberships	\$592	\$4,350		\$69	\$824	
Other (please specify)						
TOTAL	\$48,460	\$4,389	\$0	\$7,405	\$824	\$(

Name: Dr. James Cofer - hire date 8/1/10
Institution: Missouri State University
Phone: (417) 836-4232
Contact Person: Tina McManus-Director of Accounting and Budgeting

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary				\$252,083		
Medical/dental/vision insurance for self				\$4,945		
Medical/dental/vision insurance for spouse/family				\$3,200		
Long-term disability for self				\$312		
Deferred compensation						
Retirement benefit						
Other (please specify)						
Basic Life				\$303		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$0	\$0	\$0	\$260,843	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated			
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)				\$41,250			
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings				\$207			
Club/other memberships							
Other (please specify)							
Meal Plans				\$1,195			
TOTAL	\$0	\$0	\$0	\$42,652	\$0	\$0	

Name: **Drew Bennett**

Institution: Missouri State University - West Plains

Phone: (417) 836-4232

Contact Person: Tina McManus - Director of Accounting and Budgeting

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$131,022			\$131,022			
Medical/dental/vision insurance for self	\$396			\$396			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self	\$254			\$254			
Deferred compensation							
Retirement benefit	\$18,923			\$19,225			
Other (please specify)							
Basic Life	\$158						
Additional life insurance	Value						
	\$132,000						
Annuity	Value						
TOTAL	\$150,753	\$0	\$0	\$150,897	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing	\$12,845	,	\$6,171	\$12,845	,	\$6,171	
Utilities	\$4,905			\$5,087			
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper	\$7,229			\$7,749			
Insurance for personal property							
Entertainment		\$314			\$0		
Automobile							
Automobile allowance (provided for private lease/purchase)	\$6,000			\$6,000			
Automobile repair/maintenance/mileage	\$3,780			\$4,138			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships		\$1,932			\$2,036		
Other (please specify)							
TOTAL	\$34,759	\$2,246	\$6,171	\$35,819	\$2,036	\$6,171	

Name: Dr. Robert A. Vartabedian

Institution: Missouri Western State University

Phone: **816-271-4527**

Contact Person: Sally Sanders, Director of Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$185,400	\$0	\$0	\$185,400	\$0	\$0	
Medical/dental/vision insurance for self	\$5,838	\$0	\$0	\$5,800	\$0	\$0	
Medical/dental/vision insurance for spouse/family	\$0	\$0	\$0	\$0	\$0	\$0	
Long-term disability for self	\$334	\$0	\$0	\$334	\$0	\$0	
Deferred compensation	\$0	\$0	\$0	\$0	\$0	\$0	
Retirement benefit	\$17,553	\$0	\$0	\$15,633	\$0	\$0	
Other (please specify)	\$0	\$0	\$0	\$0	\$0	\$0	
Additional life insurance	\$713						
Annuity	\$22,500						
TOTAL	\$209,125	\$0	\$0	\$207,167	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated		
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	,	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing	\$0	\$0	\$0	\$0	\$0	\$0
Utilities	\$0	\$0	\$0	\$0	\$0	\$0
Housing allowance (provided for private rent/lease/purchase)	\$28,000	\$0	\$0	\$28,000	\$0	\$0
Housekeeper	\$0	\$0	\$0	\$0	\$0	\$0
Custodian, groundskeeper	\$0	\$0	\$0	\$0	\$0	\$0
Insurance for personal property	\$0	\$0	\$0	\$0	\$0	\$0
Entertainment	\$0	\$5,000	\$0	\$0	\$10,000	\$0
Automobile	\$0	\$0	\$0	\$0	\$0	\$0
Automobile allowance (provided for private lease/purchase)	\$12,500	\$0	\$0	\$12,500	\$0	\$0
Automobile repair/maintenance/mileage	\$0	\$0	\$0	\$0	\$0	\$0
Professional development	\$0	\$10,000	\$0	\$0	\$10,000	\$0
Expense for spouse/family to attend meetings	\$0	\$5,000	\$0	\$0	\$5,000	\$0
Club/other memberships	\$2,083	\$0	\$0	\$2,083	\$0	\$0
Other (please specify) Campus Projects	\$0	\$5,000	\$0	\$0	\$5,000	\$0
TOTAL	\$42,583	\$25,000	\$0	\$42,583	\$30,000	\$0

Name: Dr. John Jasinski

Institution: Northwest Missouri State University

Phone: 660-562-1128

Contact Person: Mary Throener, VP of Human Resources & Organizational Effectiveness

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$230,000			\$230,000			
Medical/dental/vision insurance for self	\$5,697			\$5,697			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self	\$460			\$460			
Deferred compensation							
Retirement benefit	\$31,763			\$32,131			
Other (please specify)							
Additional life insurance	Value						
	\$230,000						
Annuity	Value						
TOTAL	\$267,920	\$0	\$0	\$268,288	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing	on university grou	nds		on university grou	nds		
Utilities	not metered			not metered			
Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$10,800			\$10,800			
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships	\$1,200			\$1,200			
Other (please specify)							
TOTAL	\$12,000	\$0	\$0	\$12,000	\$0	\$0	

Name: Kenneth W. Dobbins

Institution: Southeast Missouri State University

Phone: (573) 651-2206

Contact Person: Carmen McNeely, Operations Manager, Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	FY 2010 Actual Expenditures			FY 2011 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$194,109			\$194,109				
Medical/dental/vision insurance for self	\$6,237			\$6,116				
Medical/dental/vision insurance for spouse/family								
Long-term disability for self	\$171			\$168				
Deferred compensation								
Retirement benefit	\$31,761			\$34,402				
Other (please specify)	\$951			\$926				
(Life insurance, AD&D, Employee Assistant Program,								
Parking, and Cafeteria Plan)								
Additional life insurance	Value							
Annuity	Value							
	\$25,000							
TOTAL	\$233,229	\$0	\$0	\$235,721	\$0	\$0		

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	112	DIO ACIUUI EXPERIUI	tures		1 1 2011 201111400		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)	\$30,000			\$10,000			
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$700			\$794			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$30,700	\$0	\$0	\$10,794	\$0	\$0	

Name: Troy Paino
Institution: Truman State University
Phone: 660-785-4100
Contact Person: Dave Rector

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$200,000			\$210,000			
Medical/dental/vision insurance for self	\$5,487			\$5,667			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self	\$304			\$252			
Deferred compensation							
Retirement benefit	\$24,420			\$16,317			
Other (please specify)							
Basic Life	\$416			\$277			
AD&D	\$61			\$50			
FICA/Medicare	\$9,527			\$9,667			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$240,215	\$0	\$0	\$242,230	\$0	\$0	

Other Compensation:

	FY 2010 Actual Expenditures				FY 2011 Estimated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	•	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities	\$9,456			\$9,500			
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper	\$2,936			\$2,936			
Custodian, groundskeeper	\$1,906			\$1,906			
Insurance for personal property							
Entertainment		\$5,430			\$5,400		
Automobile	\$1,542			\$2,000			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$15,840	\$5,430	\$0	\$16,342	\$5,400	\$0	

Name: Gary Forsee - President

Institution: University of Missouri - Central Administration

Phone: <u>573/882-8279</u>
Contact Person: <u>VP Human Resources</u>

Direct Compensation:

Stepped Down - January, 2011

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 201	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$400,000			\$200,000				
Medical/dental/vision insurance for self	\$2,127			\$1,859				
Medical/dental/vision insurance for spouse/family	\$2,551			\$2,231				
Long-term disability for self	\$465			\$233				
Deferred compensation (performance based)	\$100,000			\$0				
(100,000 incentive for FY10 was declined)								
Retirement benefit	\$19,520			\$11,480				
Other (please specify)								
Life	\$225			\$102				
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$524,888	\$0	\$0	\$215,905	\$0	\$0		

Other Compensation:

Г	EV 2	040 4 1 1 5 1			FV 2011 F-tim-tI		
	FY 20	010 Actual Expendi	tures		FY 2011 Estimated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)	\$17,588			\$8,712			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$17,588	\$0	\$0	\$8,712	\$0	\$0	

Name: Dr. Brady Deaton - Chancellor
Institution: University of Missouri - Columbia
Phone: 573/882-8279

Contact Person: VP Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$324,383			\$324,383			
Medical/dental/vision insurance for self	\$3,576			\$3,900			
Medical/dental/vision insurance for spouse/family	\$4,289			\$4,680			
Long-term disability for self	\$465			\$465			
Deferred compensation	\$42,000			\$42,000			
Retirement benefit	\$15,830			\$18,620			
Other (please specify)							
Life	\$171			\$164			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$390,714	\$0	\$0	\$394,212	\$0	\$0	

Other Compensation:

	FV 2	010 Actual Expendi	tures		FY 2011 Estimated		
	112	o 10 Actual Expellar	tures .		TT ZOTT ESTINATED		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$2,664			\$5,004			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$2,664	\$0	\$0	\$5,004	\$0	\$0	

Name: Leo E. Morton - Chancellor
Institution: University of Missouri - Kansas City
Phone: 573/882-8279

Contact Person: **VP Human Resources**

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$285,000			\$285,000			
Medical/dental/vision insurance for self	\$175			\$3,900			
Medical/dental/vision insurance for spouse/family	\$175			\$5,319			
Long-term disability for self	\$465			\$465			
Deferred compensation	\$13,063			\$0			
Retirement benefit	\$16,704			\$19,648			
Other (please specify)							
Life	\$214			\$169			
Additional life insurance	Value						
Annuity	Value						
		·					
TOTAL	\$315,796	\$0	\$0	\$314,501	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing		,	9 .	·		,	
Utilities							
Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$57,300			\$57,300			
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)	\$15,373			\$14,946			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings Club/other memberships							
Other (please specify)							
W							
TOTAL	\$72,673	\$0	\$0	\$72,246	\$0	\$0	

Name: Dr. John F. Carney III - Chancellor
Institution: University of Missouri - Central Administration
Phone: 573/882-8279

Contact Person: VP Human Resources

Direct Compensation:

RETIREMENT - August 31, 2011

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$289,467			\$289,467			
Medical/dental/vision insurance for self	\$3,401			\$3,723			
Medical/dental/vision insurance for spouse/family	\$1,666			\$0			
Long-term disability for self	\$465			\$465			
Deferred compensation	\$47,675			\$47,675			
Retirement benefit	\$14,126			\$16,615			
Other (please specify)							
Life	\$76			\$73			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$356,876	\$0	\$0	\$358,018	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing		,	9 .		,	,	
Utilities							
Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$0			\$0			
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)		-	-		-	-	
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Dr. Thomas F. George - Chancellor

Institution: University of Missouri - Central Administration

Phone: <u>573/882-8279</u>

Contact Person: VP Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$292,579			\$292,578			
Medical/dental/vision insurance for self	\$3,401			\$3,723			
Medical/dental/vision insurance for spouse/family	\$0			\$0			
Long-term disability for self	\$465			\$465			
Deferred compensation	\$42,000			\$42,000			
Retirement benefit	\$14,278			\$16,794			
Other (please specify)							
Life	\$110			\$105			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$352,833	\$0	\$0	\$355,665	\$0	\$0	

Other Compensation:

	FV 2	010 Actual Expendi	tures	FY 2011 Estimated			
	F1Z	10 Actual Expellul	tures		11 ZOTI Estillated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$2,203			\$689			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$2,203	\$0	\$0	\$689	\$0	\$0	

State Technical College

Name: Dr. Donald M. Claycomb

Institution: Linn State Technical College
Phone: 573-897-5000

Contact Person: John W. Nilges

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$158,468			\$158,468			
Medical/dental/vision insurance for self	\$6,158			\$6,654			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$19,856			\$21,884			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$184,482	\$0	\$0	\$187,006	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing		,	9 .		,	,	
Utilities							
Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$8,728			\$8,997			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage	\$73			\$750			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$8,801	\$0	\$0	\$9,747	\$0	\$0	

Public Two-Year Colleges

Name: Dr. Alan Marble
Institution: Crowder College
Phone: 417-451-3223

Contact Person: Ron Granger, Dean of Business and Support Services

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$129,780			\$133,673			
Medical/dental/vision insurance for self	\$4,421			\$4,828			
Medical/dental/vision insurance for spouse/family	\$0			\$0			
Long-term disability for self	\$0			\$0			
Deferred compensation	\$0			\$0			
Retirement benefit	\$17,520			\$18,714			
Other (please specify)	\$0			\$0			
Additional life insurance	Value						
Annuity	Value						
		·					
TOTAL	\$151,721	\$0	\$0	\$157,215	\$0	\$0	

Other Compensation:

	FY 2010 Actual Expenditures			FY 2011 Estimated		
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Edward Jackson, President
Institution: East Central College
Phone: 636-583-5195
Contact Person: Jon Bauer (VP, Finance & Admin)

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$154,500			\$157,590			
Medical/dental/vision insurance for self							
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$20,858			\$22,063			
Other (please specify) Description below.	\$12,757		\$6,379	\$14,018		\$7,009	
Cash value of insurance benefits for president and spouse.							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$188,115	\$0	\$6,379	\$193,671	\$0	\$7,009	

Other Compensation:

	FV 2	010 Actual Expendi	tures	FY 2011 Estimated			
	112	o 10 Actual Expellar	tures .		11 Zoli Estillated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)	\$10,800			\$10,800			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$10,800	\$0	\$0	\$10,800	\$0	\$0	

Name: Dr. Ray Cummiskey, President

Institution: Jefferson College

Phone: (636) 797-3000 x 120

Contact Person: Dr. Richard Turley, Vice President Finance & Administration

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures		
	Private Funds				
	, •			, •	Amount Above
Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
\$182,000	\$0	\$0	\$182,000	\$0	\$0
\$7,029	\$0	\$0	\$5,579	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0
\$224	\$0	\$0	\$236	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0
\$25,519	\$0	\$0	\$26,442	\$0	\$0
\$0	\$0	\$0	\$1,295	\$0	\$0
Value					
value					
Value					
\$214 772	ćo	¢0	¢215 552	ćo	\$0
	Institutional Operating Funds \$182,000 \$7,029 \$0 \$224 \$0 \$25,519 \$0	Private Funds (e.g. Institution Foundations) S182,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Institutional Operating Funds	Institutional Operating Funds (e.g. Institutions Foundations)	Institutional Operating Funds

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
		Private Funds	Estimated Value of Compensation		Private Funds	Estimated Value of Compensation	
	Institutional	(e.g. Institutional	•	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)	\$16,500	\$0	\$0	\$0	\$0	\$0	
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$7,200	\$0	\$0	\$7,200	\$0	\$0	
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Cell Phone	\$1,200	\$0	\$0	\$1,200	\$0	\$0	
TOTAL	\$24,900	\$0	\$0	\$8,400	\$0	\$0	

Name: Jackie Snyder, Chancellor through 6/30/10
Institution: Metropolitan Community College
Phone: 816-604-1234

Contact Person: Tuesday Stanley

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	FY 2010 Actual Expenditures			FY 2011 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$242,000							
Medical/dental/vision insurance for self	\$6,149							
Medical/dental/vision insurance for spouse/family	\$5,538		\$2,769					
Long-term disability for self	\$1,379							
Deferred compensation								
Retirement benefit	\$32,259							
Other (please specify)								
403b	\$1,000							
Life Insurance	\$2,875		\$958					
Additional life insurance	Value							
	\$242,000							
Annuity	Value							
TOTAL	\$291,200	\$0	\$3,727	\$0	\$0	\$0		

Other Compensation:

	TV 2	010 Actual Expendi	turos	FY 2011 Estimated		
	FY Z	T Actual Expendi	lures	FY 2011 Estillated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property	\$ 389					
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage	\$ 1,433					
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto fluids	\$ 1,669					
Internet	\$ 566					
TOTAL	\$4,057	\$0	\$0	\$0	\$0	\$(

Name: Mark James, Chancellor effective 7/1/10
Institution: Metopolitan Community College
Phone: 816-604-1011
Contact Person: Tuesday Stanley 816-604-1253

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures		
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary				\$190,000		
Medical/dental/vision insurance for self				\$7,167		
Medical/dental/vision insurance for spouse/family				\$0		
Long-term disability for self				\$1,083		
Deferred compensation						
Retirement benefit				\$26,600		
Other (please specify)						
403b				\$1,000		
Life Insurance				\$2,257		\$752
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$0	\$0	\$0	\$228,107	\$0	\$752

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated		
	11.2			1 2011 25		
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property				\$ 687		
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage				\$ 185		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto fluids				\$1,432		
TOTAL	\$0	\$0	\$0	\$2,304	\$0	\$0

Name: Joseph Seabrooks, President

Institution: Metopolitan Community College - Blue River / Penn Valley

Phone: **816-604-6542**

Contact Person: Tuesday Stanley 816-604-1253

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$148,185			\$155,594			
Medical/dental/vision insurance for self	\$6,149			\$7,167			
Medical/dental/vision insurance for spouse/family	\$2,248			\$6,123			
Long-term disability for self	\$845			\$887			
Deferred compensation							
Retirement benefit	\$20,835			\$21,783			
Other (please specify)							
403b	\$1,000			\$1,000			
Life Insurance	\$1,762		\$586	\$1,849		\$618	
Additional life insurance	Value						
	\$148,000						
Annuity	Value						
		·					
TOTAL	\$181,024	\$0	\$586	\$194,403	\$0	\$618	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	ļ		Estimated Value			Estimated Value	
	ļ	Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)	ļ						
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Auto fluids	\$2,500			\$2,760			
TOTAL	\$2,500	\$0	\$0	\$2,760	\$0	\$0	

Name: Deborah Goodall, President

Institution: Metopolitan Community College - Business & Technology

Phone: **816-604-5280**

Contact Person: Tuesday Stanley 816-604-1253

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$126,000			\$130,410			
Medical/dental/vision insurance for self	\$6,149			\$7,167			
Medical/dental/vision insurance for spouse/family	\$2,769			\$3,356			
Long-term disability for self	\$718			\$743			
Deferred compensation							
Retirement benefit	\$17,179			\$18,257			
Other (please specify)							
403b	\$1,000			\$1,000			
Life Insurance	\$1,497		\$499	\$1,552		\$519	
Additional life insurance	Value						
	\$126,000						
Annuity	Value						
TOTAL	\$155,312	\$0	\$499	\$162,485	\$0	\$519	

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		,	9 .	·		,
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto fluids	\$506			\$599		
TOTAL	\$506	\$0	\$0	\$599	\$0	\$0

Name: Fred L. Grogan, President

Institution: Metopolitan Community College - Longview

Phone: **816-604-2414**

Contact Person: Tuesday Stanley 816-604-1253

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 201	FY 2011 Estimated Expenditures			
		Private Funds		Private Funds				
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$157,250			\$162,754				
Medical/dental/vision insurance for self	\$6,149			\$7,167				
Medical/dental/vision insurance for spouse/family	\$2,769			\$3,356				
Long-term disability for self	\$896			\$928				
Deferred compensation								
Retirement benefit	\$21,242			\$22,786				
Other (please specify)								
403b	\$1,000			\$1,000				
Life Insurance	\$1,865		\$622	\$1,936		\$645		
Additional life insurance	Value							
	\$157,000							
Annuity	Value							
TOTAL	\$191,171	\$0	\$622	\$199,927	\$0	\$645		

Other Compensation:

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		,	9 ,	·		,
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto fluids	\$1,650			\$1,599		
TOTAL	\$1,650	\$0	\$0	\$1,599	\$0	\$0

Name: Merna S. Saliman, President

Institution: Metopolitan Community College - Maple Woods

Phone: **816-604-3046**

Contact Person: Tuesday Stanley 816-604-1253

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$157,250			\$162,754			
Medical/dental/vision insurance for self	\$6,149			\$7,167			
Medical/dental/vision insurance for spouse/family	\$2,769			\$3,356			
Long-term disability for self	\$896			\$923			
Deferred compensation							
Retirement benefit	\$21,242			\$22,786			
Other (please specify)							
403b	\$1,000			\$1,000			
Life Insurance	\$1,865		\$602	\$1,936		\$645	
Additional life insurance	Value						
	\$157,000						
Annuity	Value						
TOTAL	\$191,171	\$0	\$602	\$199,922	\$0	\$645	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing	1 0	,	<u> </u>		,	<u> </u>	
Utilities							
Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Auto fluids	\$1,637			\$1,819			
TOTAL	\$1,637	\$0	\$0	\$1,819	\$0	\$0	

Name: E. Bernard Franklin, President through 12/2010

Institution: Metropolitan Community College, Penn Valley

Phone: 816-604-1234

Contact Person: Tuesday Stanley

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$157,250			\$162,754			
Medical/dental/vision insurance for self	\$6,149			\$7,167			
Medical/dental/vision insurance for spouse/family	\$2,248			\$2,741			
Long-term disability for self	\$896			\$928			
Deferred compensation							
Retirement benefit	\$21,242			\$22,786			
Other (please specify)							
403b	\$1,000			\$1,000			
Life Insurance	\$1,865		\$622	\$1,936		\$645	
Additional life insurance	Value						
	\$157,000						
Annuity	Value						
		·					
TOTAL	\$190,650	\$0	\$622	\$199,312	\$0	\$645	

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		,	9 .	·		,
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,507			\$539		
TOTAL	\$1,507	\$0	\$0	\$539	\$0	\$0

Name: Steven Kurtz
Institution: Mineral Area College
Phone: 573-518-2129
Contact Person: Lisa Clauser

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$138,690			\$143,544			
Medical/dental/vision insurance for self	\$6,072			\$6,941			
Medical/dental/vision insurance for spouse/family	\$0			\$0			
Long-term disability for self	\$150			\$150			
Deferred compensation	\$8,000			\$14,000			
Retirement benefit	\$19,543			\$21,068			
Other (please specify) Mid-Year Merit	\$101			\$101			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$172,556	\$0	\$0	\$185,804	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
		Private Funds	Estimated Value of Compensation		Private Funds	Estimated Value of Compensation	
	Institutional	(e.g. Institutional		Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing	\$0			\$0			
Utilities	\$0			\$0			
Housing allowance (provided for private rent/lease/purchase)	\$0			\$0			
Housekeeper	\$0			\$0			
Custodian, groundskeeper	\$0			\$0			
Insurance for personal property	\$0			\$0			
Entertainment	\$0			\$0			
Automobile	\$22,028			\$0			
Automobile allowance (provided for private lease/purchase)	\$0			\$0			
Automobile repair/maintenance/mileage	\$6,500			\$6,500			
Professional development	\$0			\$0			
Expense for spouse/family to attend meetings	\$0			\$0			
Club/other memberships	\$0			\$0			
Other (please specify) Cell Phone	\$477			\$564			
TOTAL	\$29,005	\$0	\$0	\$7,064	\$0	\$0	

Name: EVELYN E. JORGENSON
Institution: MOBERLY AREA COMMUNITY COLLEGE
Phone: 660-263-4110 x274

Contact Person: GARY STEFFES

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$157,175			\$168,500			
Medical/dental/vision insurance for self	\$6,845			\$7,007			
Medical/dental/vision insurance for spouse/family	\$0			\$6,293			
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$22,218			\$24,565			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$186,238	\$0	\$0	\$206,365	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
	112	o 10 / letaar Experiar			TT 2011 Estimated		
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Cell Phone	\$1,125			\$1,125			
TOTAL	\$1,125	\$0	\$0	\$1,125	\$0	\$0	

Name: Dr. Neil Nuttall
Institution: North Central Missouri College
Phone: 660-359-3948
Contact Person: Sharon Barnett

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$122,799			\$125,255			
Medical/dental/vision insurance for self	\$5,136			\$5,321			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$18,448			\$19,131			
Other (please specify)							
Life Insurance Premium	\$161			\$161			
Additional life insurance	\$50,000						
Annuity	Value						
TOTAL	\$146,544	\$0	\$0	\$149,868	\$0	\$0	

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		-			-	
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment		\$926			\$1,200	
Automobile						
Automobile allowance (provided for private lease/purchase)	\$8,000			\$8,000		
Automobile repair/maintenance/mileage	\$9,178			\$10,000		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$750			\$500		
Other (please specify)						
Medical Allowance	\$0			\$500		
TOTAL	\$17,928	\$926	\$0	\$19,000	\$1,200	\$0

Name: Dr. Hal Higdon

Institution: Ozarks Technical Community College

Phone: <u>(417)</u> 447-4835

Contact Person: Marla Moody

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$230,004			\$230,004		
Medical/dental/vision insurance for self	\$5,418			\$5,757		
Medical/dental/vision insurance for spouse/family	\$9,216		\$9,216	\$10,105		\$10,105
Long-term disability for self	\$236			\$205		
Deferred compensation						
Retirement benefit	\$31,782			\$35,104		
Other (please specify)						
Group Term Life Insurance	\$147			\$132		
Health & Wellnes Center Fees	\$540			\$540		
403B				\$15,000		\$15,000
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$277,343	\$0	\$9,216	\$296,847	\$0	\$25,105

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	112	o 10 / letaar Experiar			1 1 2011 Estimated	
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage	\$3,394			\$2,928		
Professional development						
Expense for spouse/family to attend meetings	\$24					
Club/other memberships	\$728			\$420		
Other (please specify)						
TOTAL	\$4,146	\$0	\$0	\$3,348	\$0	\$0

Name: John McGuire
Institution: St. Charles Community College
Phone: 636-922-8300

Contact Person: Donna Davis

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		FY 2	010 Actual Expendi	itures			FY 201	1 Estimated Expen	ditures	
			Private Funds					Private Funds		
		Institutional	(e.g. Institution		nount Above		stitutional	(e.g. Institution		it Above
	Op	perating Funds	Foundations)	Star	ndard Benefit	Ope	erating Funds	Foundations)	Standar	d Benefit
Base salary	\$	188,967.00				\$	192,274.00			
Medical/dental/vision insurance for self	\$	6,586.00				\$	7,199.40			
Medical/dental/vision insurance for spouse/family										
Long-term disability for self	\$	484.00		\$	384.00	\$	865.23		\$	765.23
Deferred compensation										
Retirement benefit	\$	26,400.00				\$	26,918.36			
Other (please specify)										
Cell Phone Allowance	\$	840.00				\$	840.00			
Additional life insurance		Value								
Annuity		Value								
TOTAL	\$	223,277.00	\$ -	\$	384.00	\$	228,096.99	\$ -	\$	765.23

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		,	9 .	·	,	,
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$ 9,000.00			\$ 9,000.00		
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
V F H						
TOTAL	\$ 9,000.00	\$ -	\$ -	\$ 9,000.00	\$ -	\$ -

Name: Zelema Harris-Chancellor
Institution: St. Louis Community College
Phone: 314-539-5208

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expendi	tures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$232,000			\$232,555		
Medical/dental/vision insurance for self	\$6,184			\$5,777		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$364			\$364		
Deferred compensation	\$18,000		\$18,000	\$18,000		\$18,000
Retirement benefit	\$32,155			\$33,367		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$288,703	\$0	\$18,000	\$290,063	\$0	\$18,000

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing		-				
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$25,000			\$25,000		
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$1,350			\$2,079		
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$26,350	\$0	\$0	\$27,079	\$0	\$0

Name: Marcia Pfeiffer-President

Institution: St. Louis Community College at Florissant Valley
Phone: 314-539-5208

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2	010 Actual Expenditur	es	FY 2011	Estimated Expend	litures
		Private Funds (e.g.			Private Funds	
	Institutional	Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$160,005			\$160,560		
Medical/dental/vision insurance for self	\$6,184			\$5,777		
Medical/dental/vision insurance for spouse/family	\$28			\$42		
Long-term disability for self	\$364			\$364		
Deferred compensation						
Retirement benefit	\$22,346			\$23,287		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$188,927	\$0	\$0	\$190,030	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expenditu	res	FY	2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing	o postating tames		2008001	- p	, , , , , , , , , , , , , , , , , , , ,	
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$0			\$0		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Cynthia K. Hess

Institution: St. Louis Community College at Forest Park

Phone: **314-539-5208**

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		010 Actual Expendit	ures	FY 20	11 Estimated Expen	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$12,500			\$150,000		
Medical/dental/vision insurance for self	\$963			\$5,777		
Medical/dental/vision insurance for spouse/family	\$68			\$408		
Long-term disability for self	\$30			\$364		
Deferred compensation						
Retirement benefit	\$1,817			\$21,809		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
		•				
TOTAL	\$15,378	\$0	\$0	\$178,358	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendit	ures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Paul Pai-President
Institution: St. Louis Community College at Meramec
Phone: 314-539-5208

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	itures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$180,014					
Medical/dental/vision insurance for self	\$5,703					
Medical/dental/vision insurance for spouse/family	\$5,628					
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$22,371					
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$213,716	\$0	\$0	\$0	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures	FY 2011 Estimated		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing			2228217			
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$(

Name: Zerrie Campbell

Institution: St. Louis Community College at Forest Park (FY 2010) and Meramec (FY 2011)

Phone: **314-539-5208**

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expend	itures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary (Interim President)	\$160,268			\$155,127		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$21,600			\$21,718		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
,	1 2100					
TOTAL	\$181,868	\$0	\$0	\$176,845	\$0	\$0

Other Compensation:

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated		
		Private Funds	Estimated Value of Compensation		Private Funds	Estimated Value of Compensation
	Institutional	(e.g. Institutional	· ·	Institutional	(e.g. Institutional	(not reflected in
	Operating Funds	. •	budget)	Operating Funds	Foundations)	budget)
Housing	operating rands	1 oundations)	baagetj	operating rands	r ouridations)	budgetij
Utilities						
Housing allowance (provided for private rent/lease/purchase)	\$4,200			\$4,200		
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$268			\$0		
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$4,468	\$0	\$0	\$4,200	\$0	\$0

Name: George Wasson - 3 mo FY 10/1 mo FY11
Institution: St. Louis Community College at Meramec
Phone: 314-539-5208
Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	itures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$30,687			\$10,417		
Medical/dental/vision insurance for self	\$1,485			\$481		
Medical/dental/vision insurance for spouse/family	\$101			\$34		
Long-term disability for self	\$91			\$30		
Deferred compensation						
Retirement benefit	\$4,343			\$1,603		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$36,707	\$0	\$0	\$12,565	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$0		\$0			
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$0					
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	40	40	40	60	40	40
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Pamela McIntyre-President
Institution: St. Louis Community College at Wildwood
Phone: 314-539-5208

Contact Person: Ron Portman-Supervisor of Payroll

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	011 Actual Expendi	itures	FY 201	1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$160,005			\$160,560		
Medical/dental/vision insurance for self	\$6,184			\$5,777		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$364			\$364		
Deferred compensation						
Retirement benefit	\$23,436			\$23,287		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$189,989	\$0	\$0	\$189,988	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated	
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$0			\$0		
Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	¢0	Ć0	¢0	ćo	ćo	ćo
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Dr. Marsha K. Drennon
Institution: State Fair Community College
Phone: (660) 530-5800

Contact Person: Garry Sorrell, VP for Finance, Administration and Human Resources

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 2011 Estimated Expenditures		
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$132,500			\$139,050		
Medical/dental/vision insurance for self	\$5,035			\$5,595		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$18,407			\$20,044		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$155,942	\$0	\$0	\$164,689	\$0	\$0

Other Compensation:

	FV 2	010 Actual Expendi	tures		FY 2011 Estimated		
	FIZ	10 Actual Expellul	tures	1 1 2011 Estimated			
			Estimated Value			Estimated Value	
		Private Funds	of Compensation		Private Funds	of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$6,888			\$4,656			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$6,888	\$0	\$0	\$4,656	\$0	\$0	

Name: FY10 - Dr. Devin Stephenson

Institution: Three Rivers Community College
Phone: 573-840-9105

Contact Person: Charlotte Eubank, CFO

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	010 Actual Expendi	tures	FY 201	.1 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$145,400			\$147,581		
Medical/dental/vision insurance for self	\$4,787			\$0		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$21,895			\$20,661		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$172,082	\$0	\$0	\$168,242	\$0	\$0

Other Compensation:

	FY 2	010 Actual Expendi	tures		FY 2011 Estimated		
		<u> </u>				F .:	
		Private Funds	Estimated Value of Compensation		Private Funds	Estimated Value of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing	operating rames			operating amor		233624	
Utilities							
Housing allowance (provided for private rent/lease/purchase)	\$12,000			\$12,000			
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment	\$14,625						
Automobile	use fleet car			\$1,741			
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships	\$187			\$2,932			
Other (please specify)							
Cell Phone	\$1,511			\$1,093			
TOTAL	\$28,323	\$0	\$0	\$17,766	\$0	\$0	